



IDAHO DEPARTMENT OF
HEALTH & WELFARE

Division of Licensing & Certification

DDA/ResHab Certification - Statement of Deficiencies – Complaint Investigation

Agency:	Aspire Human Services, LLC	Region(s):	6
Agency Type:	Res Hab	Investigation Dates:	06/08/15
Certificate(s):	RHA-4074	Certificate(s) Granted:	<input type="checkbox"/> 6 - Month Provisional <input type="checkbox"/> 1 - Year Full <input type="checkbox"/> 3 - Year Full <input checked="" type="checkbox"/> N/A – Complaint

Rule Reference/Text	Findings	Agency's Plan of Correction (Please refer to the Statement of Deficiencies cover letter for guidance)	Date to be Corrected (mm/dd/yyyy)
16.04.17.301.02 301. PERSONNEL. 02. Work Schedules. Coverage is scheduled to assure compliance with the Individual Support and Implementation Plans and all work schedules must be kept in writing. The agency must specify provisions and procedures to assure back-up coverage for those work schedules.	<p>The agency lacked evidence coverage is scheduled to assure compliance with the Individual Support and Implementation Plans. The agency must specify provisions and procedures to assure back-up coverage.</p> <p>For example: Participant 1,2,3 reside in the same home and all require intense 1 to 1 support and did not receive 1 to 1 support for the following:</p> <ul style="list-style-type: none">05/03/15 12:00am-2:30pm & 10:30pm-11:59pm.	1. Each home has, and will continue to be assessed for staffing needs through a multi-step process including but not limited to ISP/IP comparisons, master schedule accuracy, as well as clearly established chain of command to address and fill shifts created through call-outs and or staffing shortages. In addition, a review and overhaul of current home configurations was undertaken in July/Aug 2015, and no less than 17 participants were identified and agreed to move physical residence during that period to streamline staffing	10/1/2015



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	<ul style="list-style-type: none"> • 05/04/15 12:00am-8:00am & 2:30pm-11:59pm • 05/06/15 12:00am-11:59pm • 05/07/15 12:00am-2:30pm & 10:30pm to 11:59pm • 05/08/15 12:00am-2:30pm & 10:30pm-11:59pm • 05/09/15 12:00am-11:59pm • 05/10/15 12:00am-6:30am • 05/12/15 12:00am-11:59pm • 05/13/15 12:00am-11:59pm • 05/14/15 10:30pm-11:59pm • 05/15/15 10:30pm-11:59pm • 05/16/15 12:00am-11:59pm • 05/17/15 12:00am-6:30am • 05/19/15 12:00am-11:59pm • 05/20/15 12:00am-11:59pm • 05/22/15 10:30pm-11:59pm • 05/23/15 10:30pm-11:59pm • 05/24/15 12:00am-6:30am & 10:30pm-11:59pm • 05/25/15 12:00am-6:30am & 	<p>coverage based on the above reviews. As was identified through this comprehensive process as well as current findings, an inconsistency under current job market barriers was as well identified. As such, and with full commitment to provide the required contracted hours, beginning June 2015 and ending September 2015, a decrease in census (beginning at 42) and reduced to 35 has been undertaken by this agency so as to facilitate the intersect of staffing availability vs. contracted hours. Following a combination of such actions, it is anticipated that the needs of the individuals we serve shall be met in full.</p> <p><i>2. As established on 2/28/15, complete and comprehensive reviews of both master schedules and ISP/IP will regularly continue occur to ensure obligations are being met in full. Further, as discharges or changes to ISP/IP occur, a review of home configuration</i></p>	



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	<p>10:30pm-11:59pm</p> <ul style="list-style-type: none">• 05/27/15 12:00am-6:30am & 10:30pm-11:59pm• 05/28/15 12:00am-2:30pm & 10:30pm-11:59pm• 05/29/15 12:00am-6:30am• 05/30/15 12:00am-11:59pm <p>Repeat deficiency from 01/16/15 investigation.</p>	<p><i>spreadsheets will be undertaken to assure the most effective distribution of staff to cover requirements on their behalf.</i></p> <p><i>3. Program Manager, Program Supervisors, and QIDP.</i></p> <p><i>4. Ongoing review of Master schedules will continue to occur and reflect updates. A plan for an additional two (2) discharges out of current census counts will have occurred by 9/30/2015, and corrective action completed at that date. All client home moves and consolidations will be completed by 10/1/2015, and again reviewed for effectiveness regularly moving forward.</i></p>	

Agency Representative & Title: Shawn Sayer, Program Manager <i>* By entering my name and title, I agree to implement this plan of correction as stated above.</i>	Date Submitted: 9/1/2015
Department Representative & Title: Pam Loveland-Schmidt, Licensing & Certification <i>* By entering my name and title, I approve of this plan of correction as it is written on the date identified.</i>	Date Approved: 9/2/2015